# 2903005368E

FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

RECEIVED FEC MAIL CENTER

2009 MAR 20 A II: 18

				Office Use Only	
NAME OF     COMMITTEE (in full)	USE FEC MAILING LABER OR TYPE OR PRINT	Example:If typing, typo over the lines	е		
BOMAPAC					
<u> </u>	<del></del>		<u> </u>		
ADDRESS (number and street)	1101 15th St, NW, Suite	800			
Check if different than previously reported. (ACC)	Washington		DC	20005	
2. FEC IDENTIFICATION NUI	WBER 🔻	CITY A	STATE	ZIPCODE 🛕	
C00106435	3.	IS THIS NEW (N)	OR X AME	NDED	
4. TYPE OF REPORT (Choose One)  (a) Quarterly Reports:  April 15 Quarterly Report(0)  July 15 Quarterly Report(0)  October 15 Quarterly Report(0)  January 31 Quarterly Report(0)  July 31 Mid-Year Report(Non-electi Year Only) (MY)  Termination Report(TER)	Q1) (c) 12-Day PRE-Election Report for the Q3)  YE)  Ele on (d) 30-Day Post -Electior Report for the	Apr 20 (M3)  Apr 20 (M4)  Primary (12P)  Convention (12C)  Ction on  X  General (30G)	General (12 ) Special (12  Runoff (306	Year Only) Dec 20 (M12) (Non-Election Year Only) Jan 31 (YE) Peg) Runoff (12R) G) in the State of	
5. Covering Period 1		through		2008	
I certify that I have examined this		ny knowledge and belief it is tr	ue, correct and complete	<b>).</b>	
Signature of Treasurer  Electronically-Filed by Karen Penafiel  NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.					
Office Use Only				FEC FORM 3X (Rev. 12/2004)	

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#### **SUMMARY PAGE**

	FEC Form 3X (Rev. 0	2/2003)	OF R	ECEIPTS A	IND DISBURSEMENTS				Page 2
	Write or Type Committee Name BOMAPAC	)							
	Report Covering the Period:	From:	M M 10	01	2008	To:	M* M 1 1	24	2008
_					COLUMN A This Period		Cale	COLUMN ndar Year-t	
6.		ž008	]				• • •	15	5431.80
	(b) Cash on Hand at Begining of Reporting P	eriod	[		45720.84	]			
	(c) Total Receipts (from Lir	e 19)	[	· · · · · ·	2283.00	] [	<del></del>	38	3319.00
	(d) Subtotal (add lines 6(b) 6(c) for Column A and L 6(a) and 6(c) for Colum	ines			48003.84	] [		5:	3750.80
7.	Total Disbursements (from L	ine 31)	_ [		160.53	] [	<del></del>		5907.49
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(	d))(b	- [	· · · · · · · · · · · · · · · · · · ·	47843.31	] [		47	7843.31
9.	Debts and Obligations owed the committee (Itemize all or Schedule C and/or Schedule				0.00	]			
10	Debts and Obligations owed the committee (Itemize all or Schedule C and/or Schedule	I			0.00	]			
_	X This Committee has qua	lified as a mu	ulticandidat	te committe	e. (see FEC FORM 1M)	•	<del></del>		
			For	further in	formation contact:				<del></del>
			F	999 E s	ion Commission street, NW on, DC 20463				
					800-424-9530 2-694-1100				

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FEC Form 3X (Rev. 06/2004)		Page 3
Write or Type Committee Name BOMAPAC		
Report Covering the Period: From:	01 2008 T	o: 11 24 YYYYY 2008
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	390.00	7900.00
(ii) Unitemized	1893.00	25419.00
(iii) TOTAL (add	2283.00	33319.00
Lines 11(a)(i) and (ii) ▶		
(b) Political Party Committees	0.00	0.00
(such as PACs)	0.00	5000.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry	<del></del>	
Totals to Line 33, page 5)	2283.00	38319.00
12. Transfers From Affiliated/Other		
Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures	<del></del>	
(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made		
to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts	0.00	0.00
(Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account	······	
(from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d),		
12, 13, 14, 15, 16, 17, and 18(c))	2283.00	38319.00
20. Total Federal Receipts	2000 00	20040.00
(subtract Line 18(c) from Line 19)	2283.00	38319.00

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#### Image# 3.000000

FEC Form 3X (Rev. 02/2003)

### **DETAILED SUMMARY PAGE**

of Disbursements

Page 4

	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21.	Operating Expenditures: (a) Shared Federal/Non-Federal		
	Activity (from Schedule H4)	0.00	0.00
	(i) Federal Share		
	(ii) Non-Federal Share	0.00	0.00
	(b) Other Federal Operating  Expenditures	160.53	657.49
	(c) Total Operating Expenditures		
22	(add 21(a)(i), (a)(ii) and (b))	160,53	657.49
<b>22</b> .	Committees	0.00	0.00
23.	Contributions to Federal Candidates/Committees	0.00	5050.00
24	and Other Political Committees Independent Expenditure	0.00	5250.00
	(use Schedule E)	0.00	0.00
25.	Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
	(use Schedule F)		
26.	Loan Repayments Made	0.00	0.00
_	Loans Made	0.00	0.00
28.	Refunds of Contributions To: (a) Individuals/Persons Other Than Political Committees	0.00	0.00
		0.00	0.00
	(b) Political Party Committees (c) Other Political Committees		
	(such as PACs)	0.00	0.00
	(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29.	Other Disbursements	0.00	0.00
30.	Federal Election Activity (2 U.S.C 431(20))		
	(a) Shared Federal Election Activity		
	(from Schedule H6)	0.00	0.00
	(i) Federal Share		
	(ii) "Levin" Share	0.00	0.00
	(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
	(c) Total Federal Election Activity (add	0.00	0.00
	Lines 30(a)(i), 30(a)(ii) and 30(b))		
31.	Total Disbursements (add Lines 21(c), 22,		<u>г</u>
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	160.53	5907.49
32.	Total Federal Disbursements		
	(subtract Line 21(a)(ii) and Line 30(a)(ii)	160.50	5007.40
	from Line 31)	160.53	5907.49

Image# 4.000000

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003) Page 5 III. Net Contributions/Operating **COLUMN A COLUMN B Expenditures Total This Period** Calendar Year-to-Date 33. Total Contributions (other than loans) 2283.00 38319.00 from Line 11(d), page 3) ..... 34. Total Contribution Refunds 0.00 0.00 (from Line 28(d)) ..... 35. Net Contributions (other than loans) 2283.00 38319.00 (subtract Line 34 from Line 33) ..... 36. Total Federal Operating Expenditures 160.53 657.49 (add Line 21(a)(i) and Line 21(b))......... 37. Offsets to Operating Expenditures 0.00 0.00 (from Line 15, page 3) ..... 38. Net Operating Expenditures 160.53 657.49 (subtract Line 37 from Line 36) .....

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	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 8 (check only one)  X 11a 11b 11c 12  13 14 15 16 17
	Any information copied from such Reports and 3 or for commercial purposes, other than using the	Statements ma	ay not be sold or used by any padress of any political committed	person for the purpose of soliciting contributions ee to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) BOMAPAC			
Α.	Full Name (Last, First, Middle Initial) Stephanie Geiser Mailing Address 3318 Kleeman Lake Ct			Date of Receipt
	City Cincinnati	State OH	Zip Code 45211-2291	Transaction ID: C529330 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	c .		390.00
	Name of Employer BOMA Cincinatti	Occupation	- Evocutivo	

Association Executive

Aggregate Year-to-Date ▼

450.00

SUBTOTAL of Receipts This Page (optional)	•	390.00
TOTAL This Period (last page this line number only)	<b>-</b> ▶	390.00

Receipt For:

Primary

Other (specify) ▼

2008

X General

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Transaction (D: D74967   Disbursement   Disburse	SCHEDULE B (FEC FORM 3X)	Use separate schedule(s)	(check on	: NUMBER: lv one)	PAGE 7/8		
Any Intermetion copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commencial purposes, other than using the name and address of any political committee to solicit contributions from such committee.  NAME OF COMMITTEE (In Full) BOMAPAC  Full Name (Last, First, Middle Initial) American Express  Mailing Address 2965 West Corporate Lakes Blvd  City Weston FL 33331  Purpose of Disbursement Credit card fees Candidate Name  Office Sought:   House   Disbursement For: 2008   Primary   X General   District:   Full Name (Last, First, Middle Initial) American Express  Mailing Address 2965 West Corporate Lakes Blvd  City Weston  FL 33331  Transaction ID: D74868 Date of Disbursement this Period  Amount of Each Disbursement this Period  Transaction ID: D74868 Date of Disbursement this Period  Transaction ID: D74869 Date of Disbur	HEWIZED DISBURSEMENTS		X 21b	22 23			
NAME OF COMMITTEE (In Full) BOMAPAC  Full Name (Last, First, Middle Initial) American Express  Mailing Address 2985 West Corporate Lakes Blvd  City State Zip Code West Corporate Lakes Blvd  City State Zip Code FL 33331  Purpose of Disbursement Credit card fees Candidate Name  Office Sought: House Primary X General Primary X General District:  Full Name (Last, First, Middle Initial) American Express  Mailing Address 2985 West Corporate Lakes Blvd  City State: District:  Full Name (Last, First, Middle Initial) American Express  Mailing Address 2985 West Corporate Lakes Blvd  City State: Zip Code FL 33331  Purpose of Disbursement credit card fees Candidate Name  District:  Full Name (Last, First, Middle Initial) Suntrust Bank  Mailing Address P.O.Box 622227  City State: District:  Full Name (Last, First, Middle Initial) Suntrust Bank  Mailing Address P.O.Box 622227  City State: District:  Full Name (Last, First, Middle Initial) Suntrust Bank  Mailing Address P.O.Box 622227  City Crando FL 32862-2227  Purpose of Disbursement Bank  Mailing Address P.O.Box 622227  City Crando FL 32862-2227  Purpose of Disbursement Bank  Mailing Address P.O.Box 622227  City Crando FL 32862-2227  Purpose of Disbursement Bank  Mailing Address P.O.Box 622227  City Crando FL 32862-2227  Purpose of Disbursement Bank  Mailing Address P.O.Box 622227  City Crando FL 32862-2227  Purpose of Disbursement Bank  Mailing Address P.O.Box 622227  City Crando FL 32862-2227  Purpose of Disbursement Bank  Mailing Address P.O.Box 622227  City Crando FL 32862-2227  Purpose of Disbursement Bank  Mailing Address P.O.Box 622227  City Crando FL 32862-2227  City			ed by any person	on for the purpose of	soliciting contributions		
BOMAPAC   Full Name (Last, First, Middle Initial)   American Express   Mailing Address   2965 West Corporate Lakes Blvd   Transaction ID: D74867   Date of Disbursement   To Middle Initial)   Transaction ID: D74867   Date of Disbursement   To Middle Initial)   Transaction ID: D74867   Date of Disbursement   To Middle Initial)   American Express   Amount of Each Disbursement this Period   Transaction ID: D74868   Date of Disbursement this Period   Transaction ID: D74868   Date of Disbursement ID: D74869   Date		name and address of any politic	al committee to	solicit contributions	from such committee		
American Express  Mailing Address 2965 West Corporate Lakes Blvd  City State Zip Code FL 33331  Purpose of Disbursement Credit card fees Candidate Name  Office Sought: House Senate President District:  Full Name (Last, First, Middle Initial) American Express  Mailing Address 2965 West Corporate Lakes Blvd  City State Zip Code Primary General Prima	1 \						
City	Full Name (Last, First, Middle Initial)			Transaction ID:	D74867		
City Weston	American Express	l					
Purpose of Disbursement   Primary   General   Primary   State   Disbursement   Primary   General   Primary   Prim	Mailing Address 2965 West Corporate	Lakes Blvd		10 06	2008		
Purpose of Disbursement Credit card fees Candidate Name  Office Sought:				Amount of Each D	Disbursement this Period		
Cradicard fees Candidate Name  Office Sought:					4.50		
Office Sought:	Credit card fees						
Senate President District:  Full Name (Last, First, Middle Initial) American Express  Mailing Address 2965 West Corporate Lakes Blvd  City State Zip Code Weston FL 33331  Purpose of Disbursement credit card fees Candidate Name  Office Sought: House Senate President District:  Full Name (Last, First, Middle Initial) Suntrust Bank  Mailing Address P.O.Box 622227  City State Zip Code Senate Primary X General Other (specify) ▼  Transaction ID: D74868 Date of Disbursement this Period  Amount of Each Disbursement this Period  Category/ Type  Transaction ID: D74869 Date of Disbursement  Total President  Transaction ID: D74869 Date of Disbursement  Transaction ID: D74869 Date of Disbursement  Total President  Transaction ID: D74869 Date of Disbursement  Total President  T							
President   District:   Dis	· · ·						
State: District:  Full Name (Last, First, Middle Initial) American Express  Mailing Address 2965 West Corporate Lakes Blvd  City Weston State Zip Code Weston FL 33331  Purpose of Disbursement credit card fees Candidate Name  Office Sought: House President State: District:  Full Name (Last, First, Middle Initial) Suntrust Bank  Mailing Address P.O.Box 622227  City Orfando FL 32862-2227  Purpose of Disbursement Bank fees Candidate Name  Office Sought: House State Zip Code Orfando FL 32862-2227  City Category (Type)  Transaction ID: D74869 Date of Disbursement Initial) Date of Disbursement Initial (Type)  Transaction ID: D74869 Date of Disbursement Initial (Type)  Transaction ID: D74868  Amount of Each Disbursement Initial (Type)  Transaction ID: D74869 Date of Disbursement Ini							
American Express  Mailing Address 2965 West Corporate Lakes Blvd  City State Zip Code Weston FL 33331  Purpose of Disbursement credit card fees Candidate Name  Office Sought: House Senate President State: District:  Full Name (Last, First, Middle Initial) Suntrust Bank  Mailing Address P.O.Box 622227  City Orlando FL 32862-2227  Purpose of Disbursement Bank fees Candidate Name  Orlando FL 32862-2227  Purpose of Disbursement Bank fees Candidate Name  Office Sought: House Senate Primary X General Category/ Type  Office Sought: House Senate Primary X General Category/ Type  Office Sought: House Senate Primary X General Category/ Type  Office Sought: House Senate Primary X General Category/ Type  Office Sought: House Senate Primary X General Category/ Type  Office Sought: House Senate Primary X General Category/ Type  Office Sought: House Senate Primary X General Category/ Type  Office Sought: House Senate Primary X General Category/ Type  Office Sought: House Senate Primary X General Category/ Type  Office Sought: House Senate Primary X General Category/ Type  Office Sought: House Senate Primary X General Category/ Type  Office Sought: House Senate Primary X General Category/ Type  Office Sought: House Senate Primary X General Category/ Type  Office Sought: House Senate Primary X General Category/ Type  Office Sought: House Senate Primary X General Category/ Type	State: District:						
Mailing Address   2965 West Corporate Lakes Blvd							
City Weston FL 33331  Purpose of Disbursement Credit card fees Candidate Name  Office Sought:    House	American Express						
Weston FL 33331  Purpose of Disbursement credit card fees  Candidate Name  Office Sought: House Senate Primary General Other (specify) ▼  State: District:  Full Name (Last, First, Middle Initial) Suntrust Bank  Mailing Address P.O.Box 622227  City State Zip Code Orlando FL 32862-2227  City Orlando FL 32862-2227  Purpose of Disbursement Bank fees  Candidate Name  Office Sought: House Senate Primary General Other (specify) ▼  State: District: 2008  Gategory/ Type  Amount of Each Disbursement this Period Other (specify) ▼  State: District: 32862-3227  Subtrotal of Disbursements This Page (optional)	Mailing Address 2965 West Corporate	Lakes Blvd		10 0 08	2008		
Purpose of Disbursement credit card fees  Candidate Name  Office Sought: House Senate Primary General Other (specify) ▼  City State Zip Code Orlando FL 32862-2227  Purpose of Disbursement Bank fees  Candidate Name  Office Sought: House Senate Primary General Other (specify) ▼  City State Zip Code FL 32862-2227  Purpose of Disbursement Bank fees  Candidate Name  Office Sought: House Senate Primary General Other (specify) ▼  State: District:  Disbursement For: 2008  Category/ Type  Amount of Each Disbursement this Period Other (specify) ▼  Substort AL of Disbursements This Page (optional) ■  138.19	City Weston			Amount of Each D	Disbursement this Period		
Candidate Name  Office Sought:					32.93		
Office Sought:			·- <u></u>				
Senate President Other (specify) ▼  State: District:  Full Name (Last, First, Middle Initial) Suntrust Bank  Mailing Address P.O.Box 622227  City State Zip Code Orlando FL 32862-2227  Purpose of Disbursement Bank fees Candidate Name  Office Sought: House Senate Primary X General Other (specify) ▼  State: District:  Subtotal President Other (specify) ▼  State: District:  Subtotal Primary X General Other (specify) ▼  Subtotal Disbursement For: 2008 Primary X General Other (specify) ▼  Subtotal Disbursements This Page (optional)	Candidate Name						
State: District:  Full Name (Last, First, Middle Initial) Suntrust Bank  Mailing Address P.O.Box 622227  City State Zip Code Orlando FL 32862-2227  Purpose of Disbursement Bank fees Candidate Name  Office Sought: House Primary General Other (specify)  Senate Primary General Other (specify)  Subtotal of Disbursements This Page (optional)	Office Sought: House Disbu						
State: District:  Full Name (Last, First, Middle Initial) Suntrust Bank  Mailing Address P.O.Box 622227  City State Zip Code Orlando FL 32862-2227  Purpose of Disbursement Bank fees Candidate Name  Office Sought: House Senate Primary General Other (specify) ▼ State: District:  SUBTOTAL of Disbursements This Page (optional)							
Full Name (Last, First, Middle Initial) Suntrust Bank  Mailing Address P.O.Box 622227  City State Zip Code Orlando FL 32862-2227  Purpose of Disbursement  Bank fees  Candidate Name  Office Sought: House Senate Primary General Other (specify) Type  State: District:  SUBTOTAL of Disbursements This Page (optional)		Other (specify) ▼					
Suntrust Bank  Mailing Address P.O.Box 622227  City Orlando FL 32862-2227  Purpose of Disbursement Bank fees  Candidate Name  Office Sought: House Primary General Other (specify) ▼  State: District:  Date of Disbursement  Mo M / P1 O / 2008  Amount of Each Disbursement this Period  Category/ Type  Category/ Type  Other (specify) ▼  Subtotal of Disbursement  Mo M / P1 O / 2008  Amount of Each Disbursement this Period  Category/ Type  Category/ Type  State: District:		<u> </u>		Transaction ID:	D7/860		
City Orlando FL 32862-2227  Purpose of Disbursement Bank fees Candidate Name  Category/ Type  Office Sought: House Disbursement For: 2008 Senate Primary General Other (specify) ▼  State: District:  SUBTOTAL of Disbursements This Page (optional)	Suntrust Bank						
Orlando FL 32862-2227  Purpose of Disbursement Bank fees  Candidate Name  Category/ Type  Office Sought: House Disbursement For: 2008 Senate Primary General President Other (specify) ▼  Substoctate	Mailing Address P.O.Box 622227			10 M / 10	2008		
Orlando FL 32862-2227  Purpose of Disbursement Bank fees  Candidate Name  Category/ Type  Office Sought: House Disbursement For: 2008 Senate Primary General President Other (specify) ▼  Substoctate	City	State Zip Code	<u> </u>	Amount of Each [	Disbursement this Period		
Bank fees  Candidate Name  Category/ Type  Office Sought: House Disbursement For: 2008 Senate Primary General President Other (specify) ▼  State: District:  SUBTOTAL of Disbursements This Page (optional)	Orlando				<del></del>		
Candidate Name  Category/ Type  Office Sought: House Disbursement For: 2008 Senate Primary X General President Other (specify) ▼  State: District:  SUBTOTAL of Disbursements This Page (optional)	•	•					
Office Sought: House Disbursement For: 2008 Senate Primary X General President Other (specify) ▼  State: District:  SUBTOTAL of Disbursements This Page (optional)		Category/					
Senate Primary X General  Other (specify) ▼  SUBTOTAL of Disbursements This Page (optional)		, calogo.).					
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#### **SCHEDULE B (FEC Form 3X)** FOR LINE NUMBER: PAGE 8/8 Use separate schedule(s) (check only one) **ITEMIZED DISBURSEMENTS** for each category of the Х 21b 22 24 25 26 **Detailed Summary Page** 27 28a 28b 28c 30b Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (In Full) **BOMAPAC** Full Name (Last, First, Middle Initial) Transaction ID: D74870 A. Suntrust Bank **Date of Disbursement** Mailing Address 10 ั2 1 2008 P.O.Box 622227 City State Zip Code Amount of Each Disbursement this Period Orlando 32862-2227 FL Purpose of Disbursement 11.50 Account Analysis Fee Candidate Name Category/ Type Office Sought: House Disbursement For: 2008 Senate Primary X General President Other (specify) ▼ District: State: Full Name (Last, First, Middle Initial) Transaction ID: D75139 В. Suntrust Bank **Date of Disbursement** ำ 0 2008 Mailing Address P.O.Box 622227 City State Zip Code Amount of Each Disbursement this Period Orlando 32862-2227 2.37 Purpose of Disbursement Merchant fees Candidate Name

	Туре	
Office Sought: House Disbursement For: Senate Primary President Other (spe	2008 X General ecify) ▼	
Full Name (Last, First, Middle Initial)	· · · · · · · · · · · · · · · · · · ·	Transaction ID: D75140
Suntrust Bank		Date of Disbursement
Mailing Address P.O.Box 622227		111 21 2008
City State Orlando FL	Zip Code 32862-2227	Amount of Each Disbursement this Period
Purpose of Disbursement account analysis fee		8.47
Candidate Name	Category/ Type	
Office Sought: House Disbursement For: Senate Primary President Other (spe	2008 X General ecify) ▼	
State: District:		<u> </u>
UBTOTAL of Disbursements This Page (optional)	<u> </u>	22.34
OTAL This Period (last page this line number only)	<b>&gt;</b>	160.53
AN026		FEC Schedule B ( Form 3X) (Revised 02/2003

(3/2005)

## **Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS** The FEC added this page to the end of this filing to indicate how it was received. **Date of Receipt Hand Delivered Postmarked USPS First Class Mail** Postmarked (R/C) **USPS** Registered/Certified **Postmarked USPS Priority Mail** Delivery Confirmation<sup>™</sup> or Signature Confirmation<sup>™</sup> Label **Postmarked USPS Express Mail** Postmark Illegible No Postmark **Shipping Date** Overnight Delivery Service (Specify): FEEFP Next Business Day Delivery **Date of Receipt** Received from House Records & Registration Office **Date of Receipt** Received from Senate Public Records Office **Date of Receipt** Received from Electronic Filing Office Date of Receipt or Postmarked Other (Specify):